Arizona Department of Veterans' Services Post 911 Tuition Waiver and Verification Form 3839 N. 3rd Str., Suite 209 Phoenix, Arizona 85012-1570

		>>>>>>> PLEASE PRINT or TYPE <<<<<<<											
Name Military			First	Middle		Last			Jr., Sr.		Sr.		
Member/Dependent:													
Mailing Address: Number, Street, City, State, & Zip Code:													
Date of Birth: Month				nth Day Year:	Home P	hone:	Area Code Da Number:	Area Code Daytime contact Number:		Work Phone:			
I	Branc	ch of Service:	ı				Name of Unit Issuing Purple Heart Medal:						
S	ervic	e Number:			Date of Di (If applicable)	ischarge:			Rank:				
The following documents are required to be submitted with this application: (As Applicable) I.A.W. with ARS 15-1808 (D)													
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	Below applies to veterans who are or was a Resident of Arizona and received a Purple Heart and is Rated at least 50%:												
		DD 214 covering the time a Purple Heart was awarded											
		A copy of the Purple Heart Medal documentation											
		Verification of the Arizona Active Duty Assignment or a resident of Arizona during the above Purple Heart Medal											
	Verification of at least a 50% disability as determined by the Department of Veterans Affairs												
Below applies for dependents of service members killed in the line of duty:													
Circle Relationship to the Deceased Serviceman:													
Spouse Daughter Son Step-Daughter Step-Son											ı		
Casualty Report showing death													
-	Marriage Certificate												
		Birth Certificate of Dependent											
-	Serviceman's Death Certificate or Department's Statement of Killed in Line of Duty												
-	Below applies to Arizona National Guard Service:												
		All documentation most show status after September 1, 2001 for National Guard Service ONLY:											
		Documentation that veteran was discharged due to a disability											
		Verification of Arizona National Guard Service											
		For Arizona National Guard - A copy of the Purple Heart Medal documentation											
	DD 214 covering the time a Purple Heart was awarded												
					For office locations, please go to www.azdvs.gov or call 602-255-3373								
		Verifica	atio	n completed o	n:								
					by	/							
	Date Verifier AI										ADV	/S 2350	